

Application Data Sheet

Application Information

Application number::
Filing Date:: 02/25/02
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Compositions and Methods for Enhancing Drug
Delivery Across and into Ocular Tissues
Attorney Docket Number:: 019801-000240US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 31
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

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Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: P. Leo
Middle Name::
Family Name:: McGrane
Name Suffix::
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 110 Beacon Street
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Lalitha
Middle Name:: V.S.
Family Name:: Sista
Name Suffix::
City of Residence:: Sunnyvale
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1333 Floyd Ave.
City of Mailing Address:: Sunnyvale
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94087

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Thorsten

Middle Name:: A.

Family Name:: Kirschberg

Name Suffix::

City of Residence:: Mountain View

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 360 Chiquita Ave., #11

City of Mailing Address:: Mountain View

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94041

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This application is a Continuation-in-Part of 09/792,480 02/23/01

which is a	Continuation-in-Part of	09/648,400	08/24/00
which is a	Non-provisional	60/150,510	08/24/99

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::